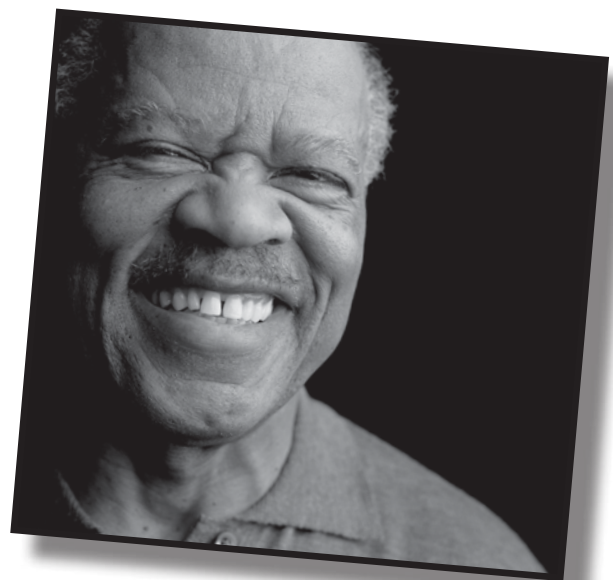




2011 in Review

**Supports and Services
for Older Michigan Citizens**



STATE OF MICHIGAN
Office of Services to the Aging

February 2012

Program data presented in this report is preliminary, compiled through December 2011. Final data will be submitted to the federal Administration on Aging by February 2012, and federal certification is expected in March 2012.

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2011 IN REVIEW

STATE OF MICHIGAN

Rick Snyder, Governor

OFFICE OF SERVICES TO THE AGING

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February 2012



RICK SNYDER
GOVERNOR

STATE OF MICHIGAN
OFFICE OF SERVICES TO THE AGING
LANSING

KARI SEDERBURG
DIRECTOR

February 2012

Dear Governor Snyder, Members of the Michigan Legislature, and Friends:

Each year the Office of Services to the Aging (OSA) is statutorily required to inform you of activities and accomplishments of Michigan's aging network, summarizing how state and federal funds have been used to help Michigan citizens aged 60 and older. In this spirit, I am pleased to present our "2011 in Review."

As I've traveled the state visiting aging programs since my gubernatorial appointment last June, it's abundantly clear that aging services are being provided in a way that is compassionate, efficient, and responsive. The expertise of the state OSA team, area agencies on aging, and service providers throughout the aging network is nothing short of phenomenal. And because of this, the challenges of balancing curtailed financial resources with serving a growing population has been met with innovation, creative problem solving, and continued quality of service.

Under OSAs leadership, the aging network is forever exploring ways of doing its work even better. To this end, working in partnership with others to advance aging causes proved highly beneficial last year. One particular initiative which has gained momentum is Aging and Disability Resource Center (ADRC) Partnerships. Each partnership is a collection of local agencies who band together in a "no wrong door" approach for the purpose of offering unbiased information and referrals to those needing long term supports and services. At this preliminary stage, it appears ADRCs are successfully moving toward shoring up local long term care resources for improved service to older adults, those with disabilities, and caregivers.

While innovation is always important, the mainstream services provided each and every day to keep people in their homes and communities also deserve special attention. The following programs are among many that have produced highly impressive results:

- 10.4 million meals were served to 108,614 people in both home and community settings;
- 13,476 older people volunteered more than 4.2 million hours of service in 2,532 community agencies;
- 6,022 caregivers benefitted from 613,189 hours of support; and
- 20,251 older people received 657,434 hours of care in the home.

In closing, I wish to thank you for your support, and look forward to working in collaboration on aging public policy in the coming months. As Michigan's population ages, we will all continue to be called upon to examine how Michigan residents may live their older years with the dignity they've earned, and the independence we all desire.

With warm regards,

A handwritten signature in black ink, reading "Kari Sederburg".

Kari Sederburg, Director



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2011 IN REVIEW — Office of Services to the Aging

Preface

The Office of Services to the Aging (OSA), Michigan's designated state unit on aging, is pleased to present its 2011 report of accomplishments in serving the interests of the state's older citizens aged 60 and older. An annual state requirement, this report is a record of progress made, as well as an information source for policy makers and others interested in an aging society.

As the state government focal point for aging issues for over 40 years, OSA is an autonomous Type 1 agency, managing \$93.9 million in federal and state (non-Medicaid) funding for community-based programs that older adults in every corner of the state have come to rely on. When a person returns home from a hospital stay, for example, nutritious meals can be delivered to his/her doorstep. If an employed family member needs help with their caregiving duties during work hours, adult day care may be an answer. And if long term care is required, providers offering an array of supports and services stand ready to help. The list goes on and on.

The OSA embraces four broad goals in serving Michigan's older residents – goals that form the basis of a state plan required by the federal Administration on Aging as a condition of funding. This report is based on these goals, reflecting priorities of the federal government, state priorities of the MI Commission on Services to the Aging, and input received from citizens and service providers.

State Plan Goals – Fiscal Years 2011-2013

A strategic direction for community-based services for older Michigan citizens

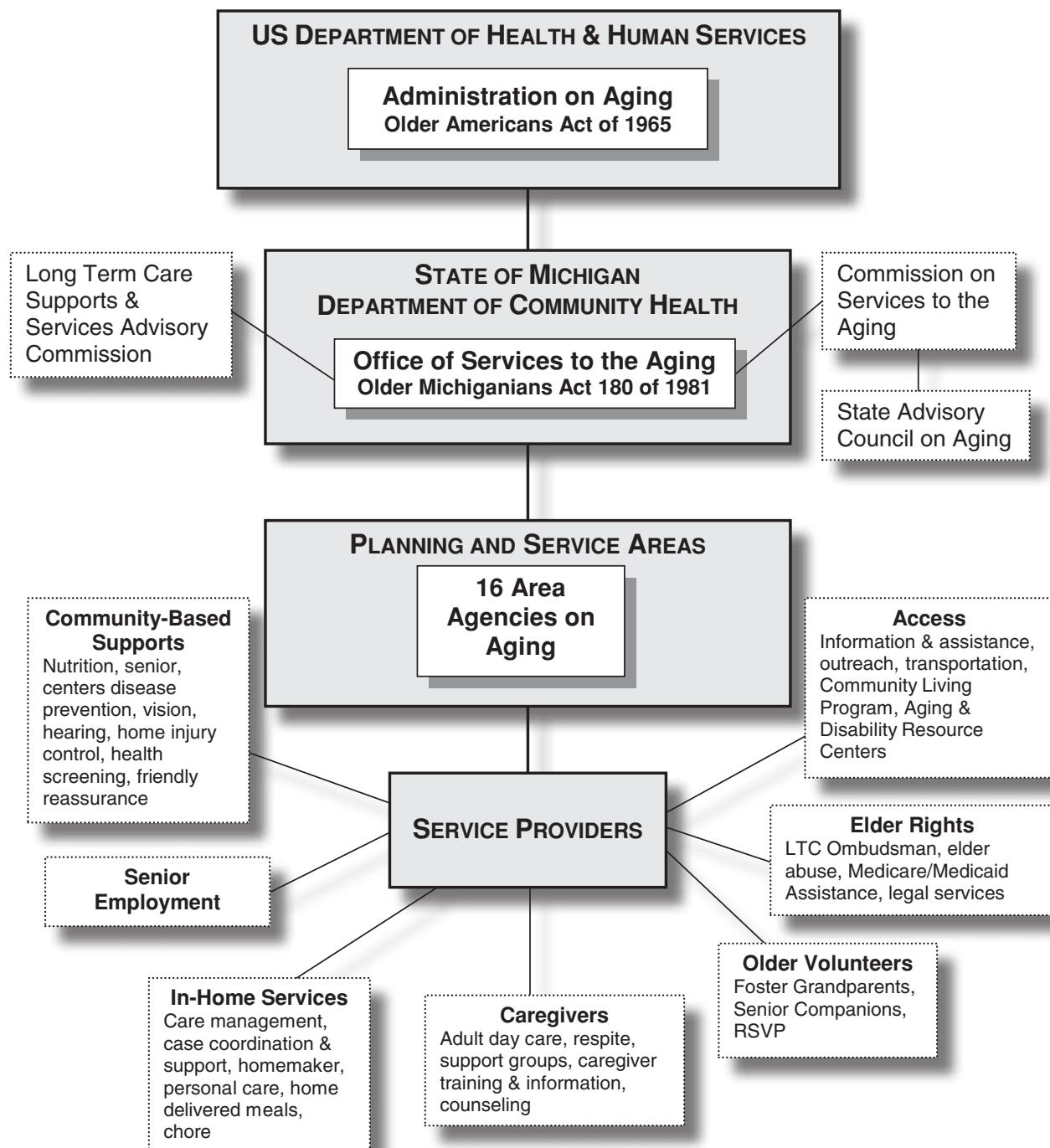
- Goal I.** Work to improve the health and nutrition of older adults
- Goal II.** Ensure that older adults have a choice in where they live through increased access to information and services
- Goal III.** Promote elder rights, quality of life, and economic security, and protect older adults from abuse, neglect and exploitation
- Goal IV.** Improve the effectiveness, efficiency, and quality of services provided through the Michigan aging network and its partners

The work of serving Michigan's older citizens could not be achieved without the expertise and dedication of Michigan's aging network – a partnership between OSA, 16 regional area agencies on aging, and more than 1,200 local community-based agencies that offer older adult and caregiver services. Collectively, this partnership values:

- helping older adults stay active, engaged, and healthy;
- helping older adults live in the setting of their choice;
- supporting family and informal caregivers;
- targeting efforts to those in greatest social, economic need; and
- promoting innovations in long term supports and services.

THE AGING NETWORK

A FEDERAL-STATE-LOCAL PARTNERSHIP



STATE PLAN GOAL #1 – HEALTH AND NUTRITION

Work to improve the health and nutrition of older adults

■ **DEMENTIA** describes a group of symptoms affecting intellectual and social abilities severely enough to interfere with daily functioning. Many causes of dementia symptoms exist, and Alzheimer's disease is the most common cause of dementia in people aged 65 and older.

OSA received two multi-year federal grants from the Administration on Aging to train and support family caregivers of people who have Alzheimer's disease and related dementia. Called "Creating Confident Caregivers: The Michigan Dementia Project," these grants produced the following results:

Expansion Project

- trained 35 trainers (including 4 master trainers) and reached 676 caregivers through 69 training offerings

Evidence-Based Program

- trained 27 trainers (including 12 master trainers) and reached 1,010 participants through 120 programs offered

Veteran-Specific Program

- trained 12 trainers and reached 271 Veterans through 36 programs offered

■ **EVIDENCE-BASED DISEASE PREVENTION (EBDP) PROGRAMS** use scientific research and testing to prove that they work. Through tested curriculums, every participant in an EBDP program receives the same information, and programs are led by trained and certified leaders. OSA manages three such programs:

Stanford Chronic Disease Self-Management Programs

Chronic Disease Self-Management Program (PATH); Diabetic Chronic Disease Self-Management Program (Diabetic PATH); Tomando (Spanish PATH); Diabetic Tomando (Diabetic Spanish PATH)

- 3,500 participants
- 420 leaders trained to lead workshops
- 25 Master Trainers trained to conduct leader training and lead workshops

Matter of Balance

- 200 participants
- 50 coaches trained to conduct workshops
- 17 Master Trainers trained to conduct coach trainings and lead workshops

Healthy Eating for Successful Living in Older Adults (new program)

- 26 participants
- 8 leaders trained

■ **NUTRITION** is critical to health, functioning, and quality of life. Nutritious meals are provided in community settings such as churches and senior centers, and to frail older adults in home settings who find meal preparation difficult. The nutrition program has proven to help combat isolation which often leads to depression in later life.

HOME DELIVERED MEALS 47,594 people received 7,786,774 meals		CONGREGATE MEALS 61,020 people received 2,613,429 meals	
Participant Profile		Participant Profile	
70%	aged 75 or older	53%	aged 75 or older
65%	female	66%	female
50%	lived alone	35%	lived alone
39%	resided in rural areas	56%	resided in rural areas
36%	low-income	26%	low-income
65%	at high nutritional risk	12%	at high nutritional risk
24%	minority by race and/or ethnicity	11%	minority by race and/or ethnicity

■ **OLDER VOLUNTEER PROGRAMS** help people stay active and engaged in their communities, and contribute to enriching the fabric of community life. Retired and Senior Volunteer Program volunteers are aged 55 and older, and serve many types of community agencies, such as schools, hospitals, and senior centers. Foster Grandparent and Senior Companion Program volunteers provide service through one-to-one assignments with young people and older adults in need of personal attention and special help.

Foster Grandparents, Senior Companions, Retired and Senior Volunteers

- 13,476 older adult volunteers contributed 4,218,106 hours of service in 2,532 public and private non-profit organizations in Michigan.

A survey conducted of older volunteers and host agencies found that:

- 98% of volunteers reported that volunteering helped them stay active, and the vast majority was satisfied with their volunteer position;
- 67% reported health improvements since volunteering;
- 93% of agencies indicated that volunteers have had a positive impact on their program; and
- 93% indicated satisfaction with the older volunteer assigned to their agency.

Special Recognition

Joan Blount of Detroit and John Villa of Beverly Hills were honored as Senior Citizens of the Year at a special ceremony during Older Michiganians Day at the State Capitol. Each year two Michigan citizens aged 60+ are recognized for their outstanding volunteer contributions by the Michigan Office and Commission on Services to the Aging, and Consumers Energy. Blount was named for her service contributions, while Villa was named in the leadership category.

STATE PLAN GOAL #2 – CHOICE AND ACCESS

Ensure that older adults have a choice in where they live through increased access to information and services

■ **AGING AND DISABILITY RESOURCE CENTER PARTNERSHIPS (ADRC)** are a collection of existing aging and disability resources that, through collaboration and coordination, help people of all ages and income levels to navigate the full range of long term supports and services options available to them.

- Partnerships are in various stages of planning and development in 67 of 83 counties;
- 11,635 information and assistance contacts were made; and
- State and national standards were developed for options counseling through a federal grant from the Administration on Aging.

■ **CAREGIVER SUPPORT SERVICES** are an essential part of elder care, as informal, unpaid caregivers provide 80% of support to family members and loved ones, often helping with bathing, banking, shopping, food preparation, and medical care. Caregiver support services are proven to alleviate caregiver burden and stress.

CAREGIVER SUPPORT SERVICES	
6,022 caregivers were supported by 613,189 hours of service adult day care, respite care, counseling services, and supplemental care	
Caregiver Profile	
72%	female
47%	younger than aged 65
33%	daughters or daughters-in-law
27%	spouses
28%	low-income
20%	minority by race and/or ethnicity

To help reduce caregiver depression and burden, OSA continued its engagement in the Tailored Caregiver Assessment and Referral or TCARE®, an evidence-based model program that assesses caregivers and links them to service choices they may most consistently use. Twenty-four people completed the TCARE® Intensive Assessor program in 2011. Twelve of 16 pilot agencies have been trained since 2009 and report continued use of the program to better assess and support caregivers with high stress levels.

■ **COMMUNITY-BASED SERVICES** support independence, help people get what they need in the setting of their choice, and cater to each person's unique needs through a person-centered planning approach. In many cases, these services delay or even negate institutional, facility-based care.

Service Type	Clients	Units
Assistance to the Hearing Impaired	2,148	4,932
Counseling	151	443
Crisis Services Energy Assistance	429	248
Disease Prevention/Health Promotion	11,279	63,521
Elder Abuse Prevention	6,347	5,395
Friendly Reassurance	267	49,060
Health Screening	1,269	1,270
Home Injury Control	1,040	3,144
Home Repair	36	369
Information & Assistance	NA	132,697
Medication Management	1,588	9,185
Nutrition Education	324	324
Outreach	NA	74,976
Personal Emergency Response	1,203	4,022
Senior Center Staffing	NA	27,579
Transportation	4,772	86,577
Vision Services	1,693	2,335
Wellness Center Support	1,849	5,562

■ **EMERGENCY PREPAREDNESS** refers to planning activities the aging network engages in to keep older adults safe in the event of a natural disaster or national emergency.

With a \$100,000 Senior Emergency Preparedness grant from the Michigan Department of Community Health (Office of Public Health Preparedness), OSA:

- Conducted three emergency preparedness training events for the aging network on maintaining nutrition services during an emergency, working with local/state emergency planning and response agencies, and on the importance of continuity of operations planning.
- Purchased equipment for area agencies on aging to use during their disaster preparedness and disaster response activities. Each received a laptop computer with durable hard-shell case, continuity of operations planning software, sets of 2-way radios, and several weather emergency radios.

OSA also actively participated in all three Michigan State Police's Office of Homeland Security nuclear power plant emergency drills and two New Madrid earthquake drills.

■ HOUSING

As an information resource for older adults, caregivers, and others on housing-oriented issues, OSA continually stays abreast of state and national housing initiatives and best practices. Information and assistance, technical assistance, and training were provided by OSA on home repair, home safety, universal design, aging in place, foreclosure prevention, and finding senior housing locations. Note that the aging network does not build or manage housing for older adults.

■ **IN-HOME SERVICES** help people with functional, physical, or mental characteristics that limit their ability to care for themselves, and that have insufficient or unavailable informal supports, such as family or friends.

IN-HOME SERVICES	
20,251 older adults were provided 657,434 units/hours of care care management, case coordination and support, chore, homemaker, home health aide, personal care programs	
Participant Profile	
71%	aged 75+
68%	female
53%	lived alone
56%	resided in rural areas
30%	low-income
13%	minority by race and/or ethnicity

■ **LIVABLE COMMUNITIES** are local initiatives that help people “age in place” at home or in the setting of their choice. Best practices are promoted in livable communities, naturally occurring communities, neighborhoods, and villages to help Michigan communities prepare for, attract, and retain older residents and their families.

- Monroe County was added to the growing list of Michigan communities receiving “Community for a Lifetime” recognition by the state.

■ PERSONAL CARE AIDES TRAINING INITIATIVE

The Michigan Building Training...Building Quality Project is a collaboration of OSA, Michigan State University, PHI, and MI Choice Waiver Agents to train 1,700 personal care aides by 2013. In year one of this grant initiative, 55 personal care aides were trained and 44 trainers identified. Training topics included prevention of adult abuse and neglect, home skills, and dementia. This three-year federal grant was made available to OSA from the U.S. Department of Health and Human Services (Division of Nursing).



STATE PLAN GOAL #3 – ELDER RIGHTS AND ECONOMIC SECURITY

Promote elder rights, quality of life, and economic security,
and protect older adults from abuse, neglect, and exploitation

■ **ELDER ABUSE, NEGLECT, AND EXPLOITATION** is a reality for an estimated 80,000 older Michigan residents who live in constant fear of the next time their lives will be threatened. In response to Governor Snyder's priority to stop elder abuse, OSA initiated an elder abuse coalition with all 16 area agencies on aging for the purpose of raising awareness of elder abuse, and advocating for legislation to implement critical reforms necessary to protect those most vulnerable.

■ **LEGAL ASSISTANCE** provides advice and counsel, direct representation, and legal education services.

- 10,237 individuals were served through information and referral or direct representation
- 200 education sessions were conducted on legal rights, housing, advance planning, and consumer issues
- 5,700 individuals were served through the Legal Hotline for Michigan Seniors, Michigan's free legal advice and referral program for older adults and their caregivers
- The Legal Hotline connected 3,623 individuals with the Michigan Benefits Enrollment and Outreach Center, and 474 individuals with the Pension Rights Project
- The program continued to see an increase in consumer cases, including those related to exploitation and fraud.

■ **MEDICARE/MEDICAID ASSISTANCE PROGRAM**, commonly known as MMAP, is part of a national network offering free, confidential health benefits counseling and assistance to people with Medicare and Medicaid.

- 56,004 individuals received direct counseling services
- 101,258 individuals were served through outreach activities
- 64,787 calls were handled
- 153 new counselors were trained
- 3,124 individuals were enrolled in the Medicare Part D low-income subsidy program for a total consumer savings of \$12,496,000
- Medicare Savings Program (MSP) enrollments saved 2,674 individuals a total of \$3,700,816
- A risk management and background check system was implemented for all 726 MMAP team members.

■ **SENIOR COMMUNITY SERVICE EMPLOYMENT PROGRAM (SCSEP)** provides part-time employment opportunities for low-income older persons aged 55 and older who wish to retain, learn, or upgrade job skills. Training assignments are made to non-profit community agencies, with the eventual goal of transitioning older workers to unsubsidized employment. Ten community-based organizations were funded to administer the program.

SENIOR COMMUNITY SERVICE EMPLOYMENT	
Profile of 673 Participants	
78%	female
55%	aged 60+
38%	provided community service to the older adult community
43%	obtained unsubsidized employment

■ **STATE LONG TERM CARE OMBUDSMAN** provides advocacy and information to individuals in need of long term supports and services, particularly those living in nursing homes, homes for the aged, and adult foster care homes. The Ombudsman also provides training, oversight, and management of the local Ombudsman programs statewide.

- Long term care consultations were held with 2,884 individuals and 670 long term care facility staff
- 239 community education presentations were held
- 95% of complaints were made against nursing facilities; 5% against adult foster care or homes for the aged
- 1,387 complaint cases involving 2,466 complaint issues were completed and closed

Top 5 Complainants (of 1,387 complaints made)

- 469 (34%) self reported by residents
- 349 (25%) initiated by Ombudsmen
- 339 (24%) reported by friends/relatives of residents
- 103 (7%) anonymously reported
- 63 (4%) reported by facility staff

Top 10 Complaints

- Involuntary discharge/eviction from a facility (261 complaints)
- Lack of dignity/staff treatment of residents (197)
- Failure to respond to requests for help (164)
- Inability to exercise rights of preference/choice, civil or religious freedoms, individual right to smoke (107)
- Requests for less restrictive settings/transition back to community (100)
- Medication administration/mistakes (87)
- Inadequate care plans (83)
- Personal property lost/stolen (65)
- Personal hygiene/grooming (59)
- Symptoms, including pain, not managed (53)

STATE PLAN GOAL #4 – EFFICIENCY AND QUALITY

Improve the effectiveness, efficiency, and quality of services provided through the Michigan aging network and its partners

■ AREA AGENCY ON AGING OVERSIGHT

OSA provided financial and program oversight of all 16 area agencies on aging in these ways:

- Area plans were thoroughly reviewed, then submitted to the Commission on Services to the Aging for approval
- Formal performance assessments were conducted
- Financial, program and audit reports were reviewed
- On-site monitoring of area agency on aging governance was conducted
- Technical assistance was provided as needed.

■ TECHNOLOGY

OSA developed its internet-based Aging Information System (AIS) to create secure information systems that support informed decision-making and effective service delivery. The AIS allows for comprehensive reporting on participants and services at the state, area agency on aging, and local levels. A comprehensive profile of participants and services helps program planners ensure that services are participant-driven and provide maximum flexibility. This supports OSA's focus on keeping older adults and caregivers healthier longer, and maintaining a coordinated network of service options that supports independence and allows individuals to receive services in the setting of their choice.

The AIS software application and associated websites supported the data collection and reporting needs of more than 1,100 users at 252 agencies across Michigan.





OFFICE OF SERVICES TO THE AGING — 2011 BUDGET APPROPRIATION

LINE ITEM	APPROPRIATION
OSA Administration	7,073,400
Community Services	34,329,400
Nutrition Services	37,435,600
Retired and Senior Volunteer Program	627 ,300
Foster Grandparent Program	2,233,600
Senior Companion Program	1,604,400
Employment Assistance	4,751,200
Respite Care	5,868,700
APPROPRIATION TOTAL	\$93,923,600
Total Federal Revenues	59,887,800
Title III – Older Americans Act	45,513,200
Title VII –Older Americans Act	713,100
Nutrition Services Incentive Program – DHHS	7,300,000
Title V – DoL	4,908,100
Title XIX – Medicaid	1,393,400
ARRA	60,000
Total State Restricted Revenues:	5,868,700
Abandoned Property Funds (Respite)	1,400,000
Merit Award Funds	4,468,700
Miscellaneous Private Revenues	647,500
General Fund/General Purpose	27,519,600
REVENUE TOTAL	\$93,923,600



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